

Utah Behavioral Health Planning and Advisory Council
Preliminary Meeting Minutes
March 7th, 2019, 12:00 p.m.
Multi-Agency State Office Building, Room 2026
195 N 1950 W, Salt Lake City

“Our mission is to ensure quality behavioral health care in Utah by promoting collaboration, advocacy, education, and delivery of services.”

COUNCIL MEMBERS PRESENT: Owen Ashton, Sigrid Nolte, Rafael Montero, Cyndie Moore, Ken Rosenbaum, Don Cleveland, James Park, Jeanine Park, Dave Wilde, Nettie Byrne, Jennifer Marchant, Lisa Hancock, Jacob Russel (remote), Jane Lepisto (remote), Emily Bennett, Cathy Davis (remote), MaryJo McMillen, Dan Braun

DSAMH STAFF PRESENT: Jeremy Christensen, Pam Bennett, Shanel Long, Heather Rydalch

OTHERS PRESENT: Stacy Stanford, Ryan Hunsaker, Kylee Porter

COUNCIL MEMBERS EXCUSED: Rob Wesemann, Kim Gardiner, Lori Cerar, Ron Bruno, Diana Aguilera, Heidi Peterson, Adam Scherzinger,

Welcome, Introductions, December meeting minutes review, new member applications, and announcements:

Owen began the meeting and introductions were made around the room.

No new member applications to approve at this meeting, but will vote on Adam Scherzinger and Ryan Hunsaker at the April meeting.

Owen asked for a motion to approve the minutes from January. Dan reviewed the minutes and asked for a change to the wording about the HRSA Grant. Nettie will make the changes before posting. Dan made a 1st motion to approve the minutes with changes, Jeanine made a 2nd, all were in favor and the motion passed unanimously.

Owen is stepping down as Co-chair and asked that if anyone is interested in taking over his duties to please contact him or Nettie or Sigrid so we can invite them to an Executive meeting to discuss.

Announcements:

The Utah Housing Coalition is hosting a Housing Day on the Hill on Fri, March 8, 2019

7:15 AM – 11:00 AM at Utah State Capitol Building, 350 State Street, Salt Lake City, UT 84111.

The cost for breakfast is \$15.00.

The NAMI National Conference will be held June 19-22, 2019 in Seattle at the Hyatt Regency. For details and to register visit <https://www.nami.org/convention>

Nettie informed the council that we will be participating in the FREDLA FAM-VOC pilot program that has been developed by researchers from [Pathways RTC](#) at Portland State University (PSU), family leaders, and experts on family leadership. It is a survey that will be sent to each member and the compiled feedback will help measure the current level of support for family voice within UBHPAC. The survey links will be sent out in April.

Health Care Advocacy in Utah- Stacy Stanford; Policy Analyst at Utah Health Policy Project

Stacy Stanford began volunteering with UHPP in 2014 as an advocate for Medicaid expansion, and came on board as a health policy associate in May of 2017. Stacy received a BA from Westminster College in Disability Justice, a customized degree program combining political science, sociology, and justice studies. Stacy has been active in disability rights for many years, and has organized more than two dozen healthcare-defense events. Before she went back to school, Stacy worked in long-term care as a recreational program director.

Who is UHPP?- Utah Health Policy Project is a non-profit, non-partisan organization advancing sustainable health care solutions for underserved Utahans, through better access, education, and public policy. www.healthpolicyproject.org. UHPP also partners with Take Care Utah, AUCH, and 2-1-1 to assist community members in finding and applying for insurance. Their site can be found at <https://takecareutah.org/>

UHPP's approach to advocacy involves:

- Legislative lobbying and policy work, locally and nationally
 - Community education and engagement
 - Grassroots activism on the ground
 - Direct service enrollment and assistance efforts
-

UHPP was quoted in the media over 80 times last year, and already quoted over 55 times in 2019. UHPP also held over 75 events last year to raise awareness for Prop 3 last year.

Medicaid Expansion & UHPP-

Stacy discussed Medicaid Expansion and described the gap in coverage for Utahans. A family of four could apply for Medicaid benefits with an annual income of \$13,500 or less, and a family of four with an annual income of \$24,600 to \$98,400 could qualify under the Marketplace subsidies. That left a gap of no coverage available for those families whose income was in the \$14,000 to \$24,500 range.

Medicaid Expansion history since 2012

- 2012-The ACA's Medicaid Expansion became a state-by-state option after a 2012 SCOTUS decision
- 2015-The Governor's Healthy Utah Medicaid expansion plan died in the House
- 2017-Targeted Adult Medicaid passed in 2016 and began enrollment in
- 2018-Prop 3 passed in November by 53% - winning in 59% of House and Senate Districts
- 2019-Legislators passed SB96 this session, repealing Prop3 and replacing it with partial expansion

SB96 Partial Expansion Fact Check-

FACT: SB96 relies on a series of federal waivers, permission from the Trump administration, to expand Medicaid.

FACT: No administration has granted approval for many of the items requested in SB96 because many items are not legal.

FACT: Under SB 96 people between 100-138% FPL will have to remain on the ACA individual market; where out of pocket costs can be prohibitive on such tight budgets and enrollment is only open 45 days of the year.

FACT: The SB96 bridge plan costs 3 times more than Proposition 3 and covers fewer people.

FACT: Proposition 3 brings back \$500+ million more in federal taxpayer dollars than SB96.

FACT: The per-capita caps in SB 96 could have catastrophic impact on Utah's budget, access to care for Utahans, and defenders of Medicaid around the nation .

SB96 vs PROP3-

UTAH MEDICAID LAW WOULD IMPOSE SIGNIFICANT RESTRICTIONS ON COVERAGE		
	Senate Bill 96 (enacted)	Proposition 3 (full expansion)
Eligibility Level	100% Federal poverty line	138% Federal poverty line
Takes coverage away for not meeting work requirement	Yes	No
Enrollment caps	Yes	No
Per capita caps that limit federal funding	Yes	No
Enhanced Medicaid match rate	Requested, but no such proposal has been approved to date	Guaranteed
Requires CMS waiver approval to implement	Yes	No
CENTER ON BUDGET AND POLICY PRIORITIES CBPP.ORG		

Where do we go from here?

- Documenting progress/lack of progress
- Holding elected official's feet to the fire on promises
- Creating materials to help educate the public on the harmful aspects of SB 96
- Holding town halls and public events to clarify what happened with expansion
- Helping drive comments on the various waivers during public comment periods
- Fighting for elected officials to better represent their constituents in the future

Legislative updates: Jeremy Christensen

Below are several of the legislative bills that were reviewed by Jeremy and being tracked by DSAMH.

S.B. 39 – Assisted Outpatient Treatment for Mental Illness

Health and Human Services Interim Committee Bill

This bill: creates a process for the provision of assisted outpatient treatment for an individual with mental illness; defines "assisted outpatient treatment" as "involuntary outpatient mental health treatment ordered under Section 62A-15-630.5"; describes the services provided to an individual receiving assisted

outpatient treatment; describes the process whereby an individual is court ordered to receive assisted outpatient treatment; and requires a designated examiner to consider assisted outpatient treatment when evaluating a proposed patient for civil commitment.

4th Sub H.B. 399- – Prohibition of the Practice of Conversion Therapy upon Minors: OPPOSED-Bill protects conversion therapists rather than banning the practice of conversion therapy.

This bill: prohibits certain mental health therapists from providing conversion therapy to a minor; limits the application of the prohibition; and makes a violation of the prohibition unprofessional conduct. Fiscal Note: Enactment of this legislation likely will not materially impact state revenue. Enactment of this legislation could cost the Department of Commerce \$600 annually from the Commerce Service Account for investigations. The agency has indicated they can absorb these costs. Enactment of this legislation likely will not result in direct, measurable costs for local governments. Enactment of this legislation likely will not result in direct expenditures from tax or fee changes for Utah residents and businesses. Enactment of this legislation likely will not change the regulatory burden for Utah residences or businesses.

2nd Sub. H.B. 431 – Expungement Act Amendments-SUPPORTED

This bill: allows for automatic expungement or deletion of charges for which an individual is acquitted, charges that are dismissed with prejudice, and certain convictions; creates a process for automatic expungement and deletion, which includes: defining terms; requiring identification of cases that may be eligible for automatic expungement or deletion; requiring a prosecuting agency to be notified before the record of a case is automatically expunged; and providing for the Judicial Council and the Department of Public Safety to make rules to implement procedures for processing an automatic expungement; and modifies the circumstances under which the state may petition a court to open an expunged record.

2nd Sub. H.B. 373 – Student Support Amendments-SUPPORT IN CONCEPT

This bill: defines terms; changes the name of the School Safety and Crisis Line to the SafeUT Crisis Line; amends provisions related to the SafeUT Crisis Line and the SafeUT Commission, including provisions related to the University Neuropsychiatric Institute charging a fee for the use of the SafeUT Crisis Line; repeals a grant program related to the SafeUT Crisis Line; authorizes the State Board of Education (board) to distribute money to local education agencies (LEAs) for personnel who provide school-based mental health support; requires the board to establish a formula for distribution of money to LEAs; enacts requirements on LEAs to receive money; requires the board to make rules related to money for the personnel; requires the Division of Substance Abuse and Mental Health to coordinate and make recommendations with the board and the Department of Health related to Medicaid reimbursement for school-based health services; enacts other provisions related to student mental health support; and makes technical and conforming changes. This bill appropriates in fiscal year 2020: to the State Board of Education - Minimum School Program - Related to Basic School Programs - Student Health and Counseling Support Program, as an ongoing appropriation: from the Education Fund, \$30,000,000; to the Department of Human Services - Division of Substance Abuse and Mental Health - Community Mental Health Services, as an ongoing appropriation: from the General Fund, (\$500,000); and to the University of Utah - SafeUT Crisis Text and Tip Line - SafeUT Operations, as an ongoing appropriation: from the Education Fund, \$1,770,000.

Subcommittee Reports:

Prevention:

Prevention is waiting to hear back from the board of education in regards to trainings about trauma informed care that we could get involved in.

Discussed how this could tie into H.B.120 and H.B.337 in regards to mental health in schools and who would be responsible for facilitating within the schools.

Treatment:

- Discussed new DSAMH Rule being created for MCOT and ACT that is needed as part of the bundled Medicaid rate.
- Talked about whether ACOT could be added on to the Rule, for potentially going to Medicaid later for a bundled rate after demonstrating that it's evidence-based.

Recovery:**Action items –**

-
- **Assign someone to find appropriate contact information regarding the new homeless shelters gearing towards specific oversight committees.**

 - Peggy and Lisa attended the Shelter the Homeless meeting on Feb 13. Lisa provided handouts on all pertinent information. They, Shelter the Homeless, are creating a steering committee with subcommittees which is where we could get involved. We will look into creating a subcommittee to attend meetings and join one of the Shelter the Homeless subcommittees.

 - **Continued concerns regarding felony drug court.**

 - Shantel joined a portion of our meeting to explain a bit about how SL County Drug Court is funded. This is where the main issue resides. It appears as if Salt Lake County Criminal Justice Services has no accountability for the grants they receive. They seem to just be handed over to them with no questions asked.
 - Issue 1) SL County Felony Drug Court/Criminal Justice Services is now outsourcing the majority of their treatment which in turn is taking up a plethora of treatment beds in the community, including those with mental disorders.
 - Issue 2) SL County Felony Drug Court/Criminal Justice Services is not sufficiently providing CPSS services to their clientele. They now only provide one part-time CPSS on site and there is no way to track the CPSS services (if any), being provided for their clientele that is in outsourced treatment centers. There is no solid model of the use of CPSS services.

Action items – Touch base with Shantel and Noella before next meeting pertaining to SL County Felony Drug Court concerns.

Next meeting will be April 4th 2019, 12:00 P.M.

Thank you for your support of the UBHPAC!

Accommodations to the known disabilities of individuals in compliance with the Americans with Disabilities Act. For accommodation information or if you need special accommodations during this meeting, please contact the Division of Substance Abuse and Mental Health at (801) 538-3939 or TTY (801) 538-3696.

The State has adopted a stipend policy that will pay for reasonable travel expenses related to consumers and advocates attendance at UBHPAC meetings. For more information please visit www.dsamh.utah.gov – Initiatives – Behavioral Health and Advisory Council – Information & Forms – UBHPAC Stipend Policy.

All meeting minutes and recordings are posted on the Public Notice website at:
<https://www.utah.gov/pmn/sitemap/publicbody/51.html>